

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Western District of Pennsylvania

Case number (If known): _____ Chapter 7

☐ Check if this is an amended filing

Official Form 105

Involuntary Petition Against an Individual

12/15

Use this form to begin a bankruptcy case against an individual you allege to be a debtor subject to an involuntary case. If you want to begin a case against a non-individual, use the *Involuntary Petition Against a Non-individual* (Official Form 205). Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write name and case number (if known).

Part 1: Identify the Chapter of the Bankruptcy Code Under Which Petition Is Filed

1. Chapter of the Bankruptcy Code

Check one:

☒ Chapter 7

☐ Chapter 11

Part 2: Identify the Debtor

2. Debtor's full name

Lori
First name

Middle name

Halpin
Last name

Suffix (Sr., Jr., II, III)

3. Other names you know the debtor has used in the last 8 years

Include any assumed, married, maiden, or trade names, or *doing business as* names.

4. Only the last 4 digits of debtor's Social Security Number or federal Individual Taxpayer Identification Number (ITIN)

☐ Unknown

xxx - xx - 1 8 5 4

OR **9** xx - xx - _____

5. Any Employer Identification Numbers (EINs) used in the last 8 years

☒ Unknown

EIN _____

EIN _____

Debtor Lori Halpin Case number (if known) _____

6. Debtor's address	Principal residence	Mailing address, if different from residence
	<u>1741 N. Winchester Ave.</u> <small>Number Street</small>	 <small>Number Street</small>
	 <u>Chicago</u> <u>IL</u> <u>60622</u> <small>City State ZIP Code</small>	 <small>City State ZIP Code</small>
	<u>Cook</u> <small>County</small>	
	Principal place of business	
	 <small>Number Street</small>	
	 <small>City State ZIP Code</small>	
	 <small>County</small>	

7. Type of business	<input type="checkbox"/> Debtor does not operate a business <i>Check one if the debtor operates a business:</i> <input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input checked="" type="checkbox"/> None of the above
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8. Type of debt	Each petitioner believes: <input type="checkbox"/> Debts are primarily consumer debts. <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts. <i>Business debts</i> are debts that were incurred to obtain money for a business or investment or through the operation of the business or investment.
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9. Do you know of any bankruptcy cases pending by or against any partner, spouse, or affiliate of this debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Debtor <u>Westgate Ventures I, LLC</u> Relationship <u>Affiliate</u> <div style="display: flex; justify-content: space-between;"> <div> District <u>W.D. Pa</u> </div> <div> Date filed <u>01/11/2012</u> <small>MM / DD / YYYY</small> </div> <div> Case number, if known <u>12-20111-CMB</u> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> Debtor _____ </div> <div> Relationship _____ </div> </div> <div style="display: flex; justify-content: space-between;"> <div> District _____ </div> <div> Date filed _____ <small>MM / DD / YYYY</small> </div> <div> Case number, if known _____ </div> </div>
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Debtor Lori Halpin Case number (if known) _____

Part 3: Report About the Case

10. Venue

Check one:

Reason for filing in this court.

☐ Over the last 180 days before the filing of this bankruptcy, the debtor has resided, had the principal place of business, or had principal assets in this district longer than in any other district.

☒ A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.

☐ Other reason. Explain. (See 28 U.S.C. § 1408.) _____

11. Allegations

Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b).

The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a).

At least one box must be checked:

☒ The debtor is generally not paying such debtor's debts as they become due, unless they are the subject of a bona fide dispute as to liability or amount.

☐ Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.

12. Has there been a transfer of any claim against the debtor by or to any petitioner?

☒ No

☐ Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy Rule 1003(a).

13. Each petitioner's claim

Name of petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien
A.G. Cullen Construction, Inc.	Civil Judgment	\$ 690,410.03
_____	_____	\$ _____
_____	_____	\$ _____
Total		\$ 690,410.03

If more than 3 petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's (or representative's) signature under the statement, along with the signature of the petitioner's attorney, and the information on the petitioning creditor, the petitioner's claim, the petitioner's representative, and the attorney following the format on this form.

Debtor Lori Halpin Case number (if known) _____

Part 4: Request for Relief

Petitioners request that an order for relief be entered against the debtor under the chapter specified in Part 1 of this petition. If a petitioning creditor is a corporation, attach the corporate ownership statement required by Bankruptcy Rule 1010(b). If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioners declare under penalty of perjury that the information provided in this petition is true and correct. Petitioners understand that if they make a false statement, they could be fined up to \$250,000 or imprisoned for up to 5 years, or both.

18 U.S.C. §§ 152 and 3571. If relief is not ordered, the court may award attorneys' fees, costs, damages, and punitive damages. 11 U.S.C. § 303(i).

Petitioners or Petitioners' Representative

Attorneys

X /s/ Paul Cullen, Vice President

Signature of petitioner or representative, including representative's title

Paul Cullen

Printed name of petitioner

Date signed 05/21/2018
MM / DD / YYYY

Mailing address of petitioner

113 Freeport Road

Number Street

Pittsburgh PA 15215
City State ZIP Code

If petitioner is an individual and is not represented by an attorney:

Contact phone _____

Email _____

Name and mailing address of petitioner's representative, if any

Paul Cullen

Name

113 Freeport Road

Number Street

Pittsburgh PA 15215
City State ZIP Code

X /s/ Richard Kalson, Esq.

Signature of attorney

Richard Kalson (PA Bar No. 69611)

Printed name

Benesch, Friedlander, Coplan & Aronoff LLP

Firm name, if any

41 S. High Street, Suite 2600

Number Street

Columbus OH 43215
City State ZIP Code

Date signed 05/21/2018
MM / DD / YYYY

Contact phone 6142239300 Email rkalson@beneschlaw.com

Debtor Lori Halpin

Case number (if known) _____

x

Signature of petitioner or representative, including representative's title

Printed name of petitioner

Date signed _____
MM / DD / YYYY

Mailing address of petitioner

Number Street

City State ZIP Code

Name and mailing address of petitioner's representative, if any

Name

Number Street

City State ZIP Code

x

Signature of Attorney

Printed name

Firm name, if any

Number Street

City State ZIP Code

Date signed _____
MM / DD / YYYY

Contact phone _____ Email _____

x

Signature of petitioner or representative, including representative's title

Printed name of petitioner

Date signed _____
MM / DD / YYYY

Mailing address of petitioner

Number Street

City State ZIP Code

Name and mailing address of petitioner's representative, if any

Name

Number Street

City State ZIP Code

x

Signature of Attorney

Printed name

Firm name, if any

Number Street

City State ZIP Code

Date signed _____
MM / DD / YYYY

Contact phone _____ Email _____